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DATE: January 6, 2006

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FROM: Shahpar Shahpar

PHONE: 602-382-6306

MESSAGE:

Attached is our Examiner Interview Summary and Response to Office Action for Serial
 No. 09/829,763

ORIGINAL DOCUMENT: Will not be sent

NUMBER OF PAGES (Including Cover):

13

CONFIRMATION NO.:

CLIENT MATTER NO.: 29288.0400

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PAGE 1/13 * RCVD AT 1/6/2006 5:53:17 PM [Eastern Standard Time] * SVR:USPTO-EFAXF-6/33 * DNIS:2738300 * CSID:602 382 6070 * DURATION (mm-ss):03:40

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **120.00**

Complete if Known

Application Number	09/829/763
Filing Date	April 10, 2001
First Named Inventor	Osamu Shibata, et al.
Examiner Name	Ponnoreay Pich
Art Unit	2135
Attorney Docket No.	28288.0400

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-2814 Deposit Account Name: Snell & Wilmer LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims		
Extra Claims		
Fee (\$)		
Fee Paid (\$)		

Total Claims - 20 or HP = **Fee (\$)** = **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims - 3 or HP = **Fee (\$)** = **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = **Extra Sheets** / 50 = **Number of each additional 50 or fraction thereof** **Fee (\$)** = **Fee Paid (\$)**

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): One-month extension

120.00

SUBMITTED BY

Signature	<u>S. Shahpar</u>	Registration No. (Attorney/Agent)	45,875	Telephone (602) 382-6306
Name (Print/Type)	Shahpar Shahpar	Date	January 6, 2006	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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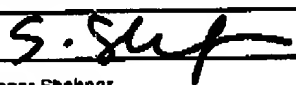
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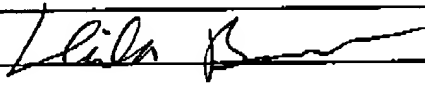
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/829/763
	Filing Date	April 10, 2001
	First Named Inventor	Osamu Shibata, et al.
	Art Unit	2135
	Examiner Name	Ponnoreay Pich
Total Number of Pages in This Submission	Attorney Docket Number	29288.0400

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Examiner Interview Summary (with Response)
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	SNELL & WILMER LLP, 400 East Van Buren, Phoenix, Arizona 85004-2202		
Signature			
Printed name	Shahpar Shahpar		
Date	January 6, 2006	Reg. No.	45,875

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Signature			
Typed or printed name	Sheila Bowman	Date	January 6, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date: January 6, 2006 By: [Signature]

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT**

Inventor(s): Osamu SHIBATA et al.
Assignee: MATSUSHITA ELECTRIC
INDUSTRIAL CO., LTD.

Docket No.: 29288.0400

Serial No.: 09/829,763
Filing Date: April 10, 2001
Title: DECRYPTION DEVICE

Art Unit: 2135
Examiner: Ponnoreay Pich

**EXAMINER INTERVIEW SUMMARY AND
RESPONSE TO OFFICE ACTION UNDER 37 C.F.R. §1.111**

Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Honorable Commissioner:

As an Examiner Interview Summary and in reply to the Office Action mailed on September 8, 2005, please consider the following amendments and remarks. This Response is being filed within 4 months of the mailing date of the Office Action, so that a 1 month extension fee applies.

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